

Provider News & Resources

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Did You Know?



Third-Party Liability (TPL) updates for a member's eligibility can be submitted by the provider via the Provider Web Portal.

Visit the <u>Provider Web Portal Quick Guide: Adding and Updating Third-Party Liability (TPL) Information web page</u>, available on the <u>Quick Guides web page</u>, for illustrated step-by-step instructions on adding and updating TPL information via the Web Portal.

A weekly automated process will reduce turnaround time on the processing of TPL information entered in the Web Portal.

Visit the <u>General Provider Information Manual</u>, available on the <u>Billing Manuals web page</u>, for more information on billing claims with TPL information.

Outpatient Hospital Enhanced Ambulatory Patient Grouper (EAPG) Claims Reprocessed for 1% Rate Decrease

Some outpatient hospital EAPG claims with dates of service on or after July 1, 2020, were overpaid due to the 1% rate decrease implemented in Colorado interChange on January 5, 2021, in accordance with House Bill (HB) 20-1360.

Affected claims were reprocessed and funds recouped on January 29, and February 5, 12 and 19, 2021. This will appear on remittance advices beginning Monday, February 1 throughout the month of February.

Claims impacted by the EAPG drug re-weight policy were not adjusted as part of this effort. Visit the <u>Outpatient Hospital Payment web page</u> for a listing of the rates now in effect. Refer to the <u>August 2020 (B2000451)</u> and <u>February 2021 (B2100459)</u> Provider Bulletins for more information on the 1% rate decrease.

All Providers



COVID-19 Co-Pay Amounts

Providers are instructed to not collect co-pay amounts from any Health First Colorado (Colorado's Medicaid Program) member for the following types of visits related to COVID-19:

• Visits where any Advisory Committee on Immunization Practices (ACIP)-recommended vaccine

is administered. This includes COVID-19 vaccine administration.

- Visits where a COVID-19 diagnostic test is performed.
- Visits where treatment is provided to a member diagnosed with COVID-19.

Claims for these visits will not have a co-pay deducted for members who are otherwise responsible for cost-sharing. The general co-pay policy can be found in the <u>General Provider Information Manual</u>.

Resolved Issues

Resolved 2/17/21

All Providers

Claims Suspending for HCPCS 2021 Quarterly Update Procedure Codes for Explanation of Benefits (EOB) 0000 "This Claim/Service Is Pending for Program Review"

Claims billed with HCPCS 2021 Quarterly Update procedure codes were suspending for EOB 0000 - "This claim/service is pending for program review." The Colorado interChange has been updated with the 2021 HCPCS Quarterly Update billing codes based on the Centers for Medicare & Medicaid Services (CMS) annual release of deletions, changes and additions.

For more information, refer to the <u>Healthcare Common Procedures Coding System (HCPCS) Updates</u> for 2021 Special Provider Bulletin.

Claims were released from suspense 2/19/21.

Issue resolved 2/17/21.

ClaimsXten™ Resolved Issues

Resolved 2/11/21

Vision Providers

Claims for Vision Code 92310 with Modifier 55 Denying for Explanation of Benefits (EOB) 7817

Some claims for procedure code 92310 billed with the 55 modifier were denying for EOB 7817 - "The payment modifier is not appropriate with the procedure code billed."

Claims were reprocessed 2/16/21.

Issue resolved 2/11/21.

Please do not reply to this email; this address is not monitored.